

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L54654

1. Entity Name
ACADEMY CARPET CLEANERS, INC.



Principal Place of Business

% GAILE MINER
5576 PARK RD
FT. MYERS, FL 33908

Mailing Address

% GAILE MINER
5576 PARK RD
FT. MYERS, FL 33908



01052005 No Chg-P CF2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0186151

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MINER, GAILE
5576 PARK RD
FT. MYERS, FL 33908

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000182686
01/19/05-80038-009 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
ST
MINER, GAILE A
STREET ADDRESS
5576 PARK RD
CITY-ST-ZIP
FT. MYERS, FL

TITLE
NAME
P
MINER, FRANKLIN H
STREET ADDRESS
5576 PARK RD
CITY-ST-ZIP
FORT MYERS, FL 33908

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/05
Date

239-267-5700
Daytime Phone #